

#1624

CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)

Applicant(s): Khanna et. al.

Docket No.

S03284/00/US

Serial No. **AUG 03 2002**
09/882,186

Filing Date
06/15/2001

Examiner
Unknown

Group Art Unit
Unknown

Invention: Cycloalkyl Alkanoic Acids as Integrin Receptor Antagonists

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AUG 09 2002

TECH CENTER 1600/2900

I hereby certify that this **Suppl. IDS, Form PTO-1449, Copies of References, Fee Transmittal, Postcard**
(Identify type of correspondence)

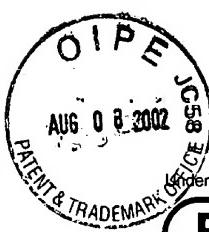
is being deposited with the United States Postal Service as first class mail in an envelope addressed to: The
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT \$180.00

Complete if Known

Application Number	09/882,186
Filing Date	06/15/2001
First Named Inventor	Khanna et. al.
Examiner Name	Unknown
Group Art Unit	Unknown
Attorney Docket No.	S03284/00/US

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METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number 19-1025

Deposit Account Name **Pharmacia Corporation**

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee			
106 330	206 165	Design filing fee			
107 510	207 255	Plant filing fee			
108 740	208 370	Reissue filing fee			
114 160	214 80	Provisional filing fee			
SUBTOTAL (1)					

2. EXTRA CLAIM FEES FOR UTILITY AND

Total Claims	Extra Claims		Fee from below	Fee Paid
	-20** =	0 X		
Independent Claims		-3** =	0 X	0.00
Multiple Dependent			=	

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103 18	203 9	Claims in excess of 20			
102 84	202 42	Independent claims in excess of 3			
104 280	204 140	Multiple dependent claim, if not paid			
109 84	209 42	** Reissue independent claims over original patent			
110 18	210 9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)				\$0.00	

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath			
127 50	227 25	Surcharge - late provisional filing fee or cover sheet			
139 130	139 130	Non - English specification			
147 2,520	147 2,520	For filing a request for ex parte reexamination			
112 920*	112 920*	Requesting publication of SIR prior to Examiner action			
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action			
115 110	215 55	Extension for reply within first month			
116 400	216 200	Extension for reply within second month			
117 920	217 460	Extension for reply within third month			
118 1,440	218 720	Extension for reply within fourth month			
128 1,960	228 980	Extension for reply within fifth month			
119 320	219 160	Notice of Appeal			
120 320	220 160	Filing a brief in support of an appeal			
121 280	221 140	Request for oral hearing			
138 1,510	138 1,510	Petition to institute a public use proceeding			
140 110	240 55	Petition to revive - unavoidable			
141 1,280	241 640	Petition to revive - unintentional			
142 1,280	242 640	Utility issue fee (or reissue)			
143 460	243 230	Design issue fee			
144 620	244 310	Plant issue fee			
122 130	122 130	Petitions to the Commissioner			
123 50	123 50	Processing fee under 37 CFR § 1.17(q)			
126 180	126 180	Submission of Information Disclosure Statement		180.00	
581 40	581 40	Recording each patent assignment per property (times number of properties)			
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))			
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))			
179 740	279 370	Request for Continued Examination (RCE)			
169 900	169 900	Request for expedited examination of a design application			

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$180.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Rachel A. Polster	Registration No. (Attorney/Agent)	47,004	Telephone	6-314-694-7354
Signature	<i>Rachel A. Polster</i>			Date	Aug. 2, 2002

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Case S03284/00/US

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

KHANNA ET AL

SERIAL NO: 09/882,186 ✓

FILED: June 15, 2001 ✓

GROUP ART UNIT: Unknown

EXAMINER: Unknown

DATE: August 5, 2002

TITLE: CYCLOALKYL ALKANOIC ACIDS AS INTEGRIN RECEPTOR ANTAGONISTS ✓

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
UNDER 37 CFR 1.97-1.98

Commissioner of Patents and Trademarks
Washington, D.C. 20231

Sir:

This Supplemental Information Disclosure Statement is filed pursuant to 37 CFR 1.97-1.98 and MPEP §609. The present Information Disclosure Statement, supplements the Information Disclosure Statement being filed herewith simultaneously. Any fee required by 37 CFR 1.97-1.98 should be charged to Deposit Account No. 19-1025.

These newly cited documents are as pertinent as the documents previously cited in this prosecution.

Respectfully submitted,

Rachel A. Polster
Attorney for Applicants
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(314) 694-7354 (St. Louis)

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Corporate Patent Department
800 North Lindbergh Boulevard, 04E
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